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CARLSON, GASKEY & OLDS, P.C. 400 WEST MAPLE ROAD **SUITE 350 BIRMINGHAM, MI 48009** (Depositor's name) Laura Combs 00000071 10721944 11/21/2006 CCHAU2 (Signature) Mura 1400.00 OP 01 FC:1501 11-16 (Date) -06 02 FC:1504 <u>300,00 DP</u> FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 6899 60130-1909;03MRA0457 10/721,944 11/25/2003 Jack Darrin Oatos TITLE OF INVENTION: SLINGER AND WEAR SLEEVE SEAL ASSEMBLY **SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE** PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE \$1700 12/06/2006 \$1400 \$300 \$0 NO nonprovisional CLASS-SUBCLASS **EXAMINER** ART UNIT 277-549000 3673 GROSZ, ALEXANDER 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Carlson, Gaskey, & Olds (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Troy, Michigan ArvinMeritor Technology, LLC Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual' 🖾 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any ☐ Advance Order - # of Copies overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2) NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. interest as shown by the records of the Authorized Signature Registration No. 33,080 Theodore W. Olds Typed or printed name

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